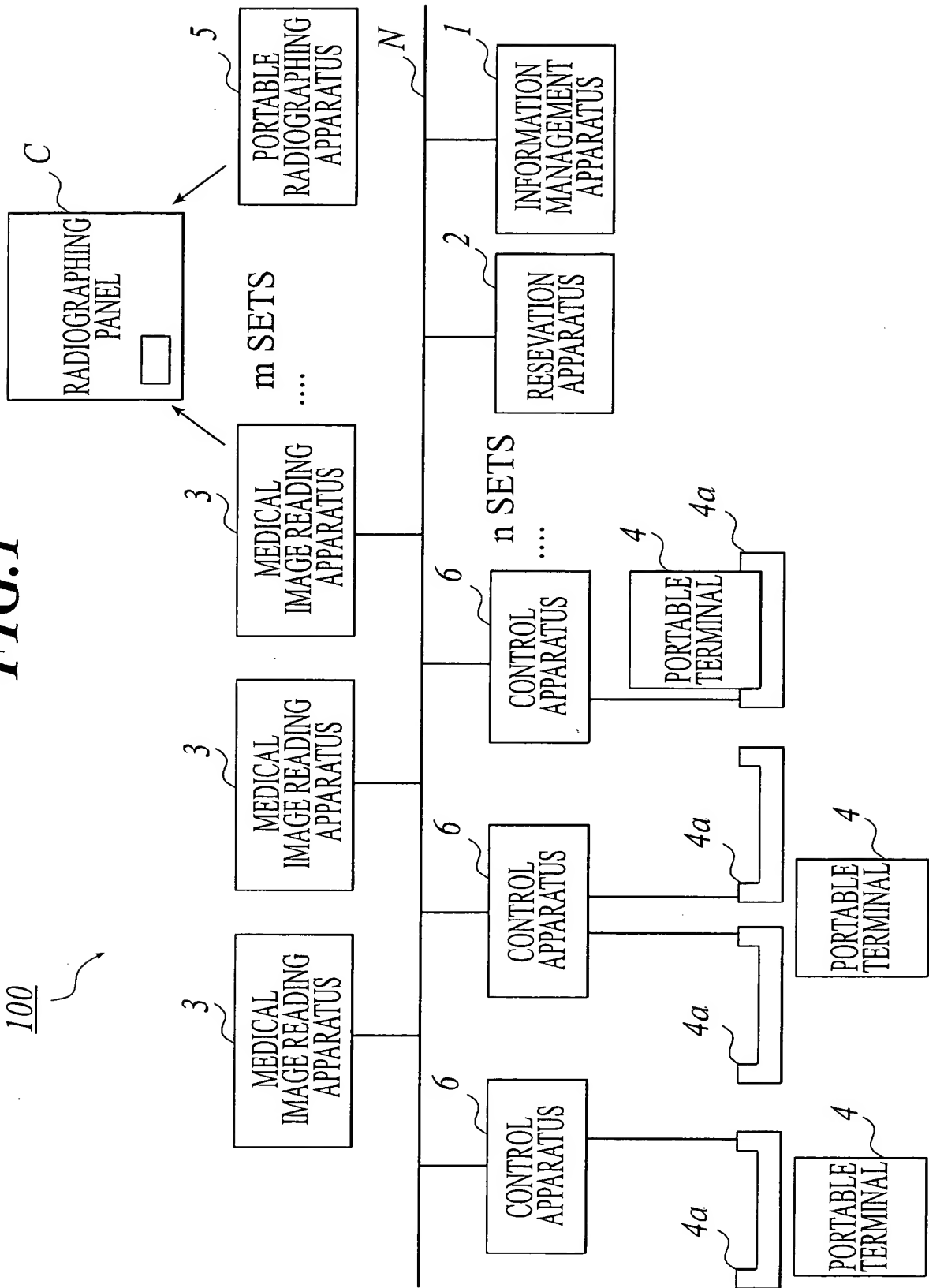


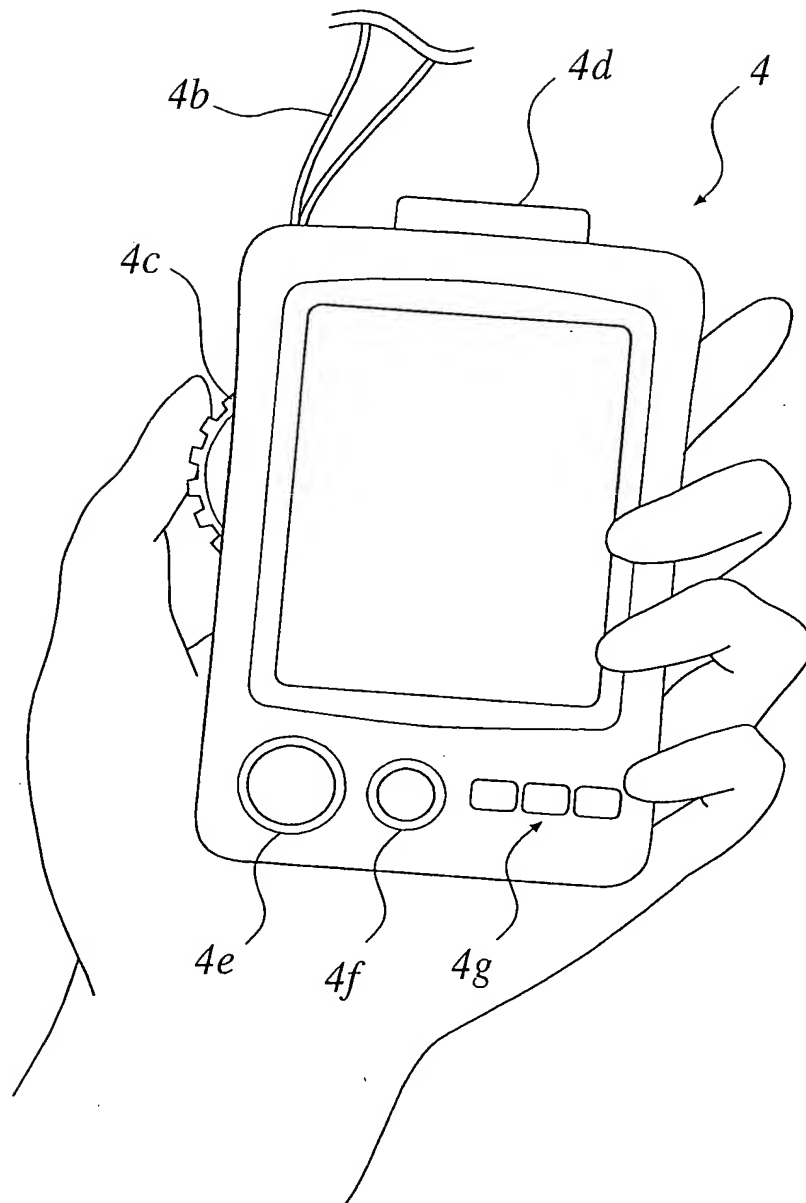
FIG. 1



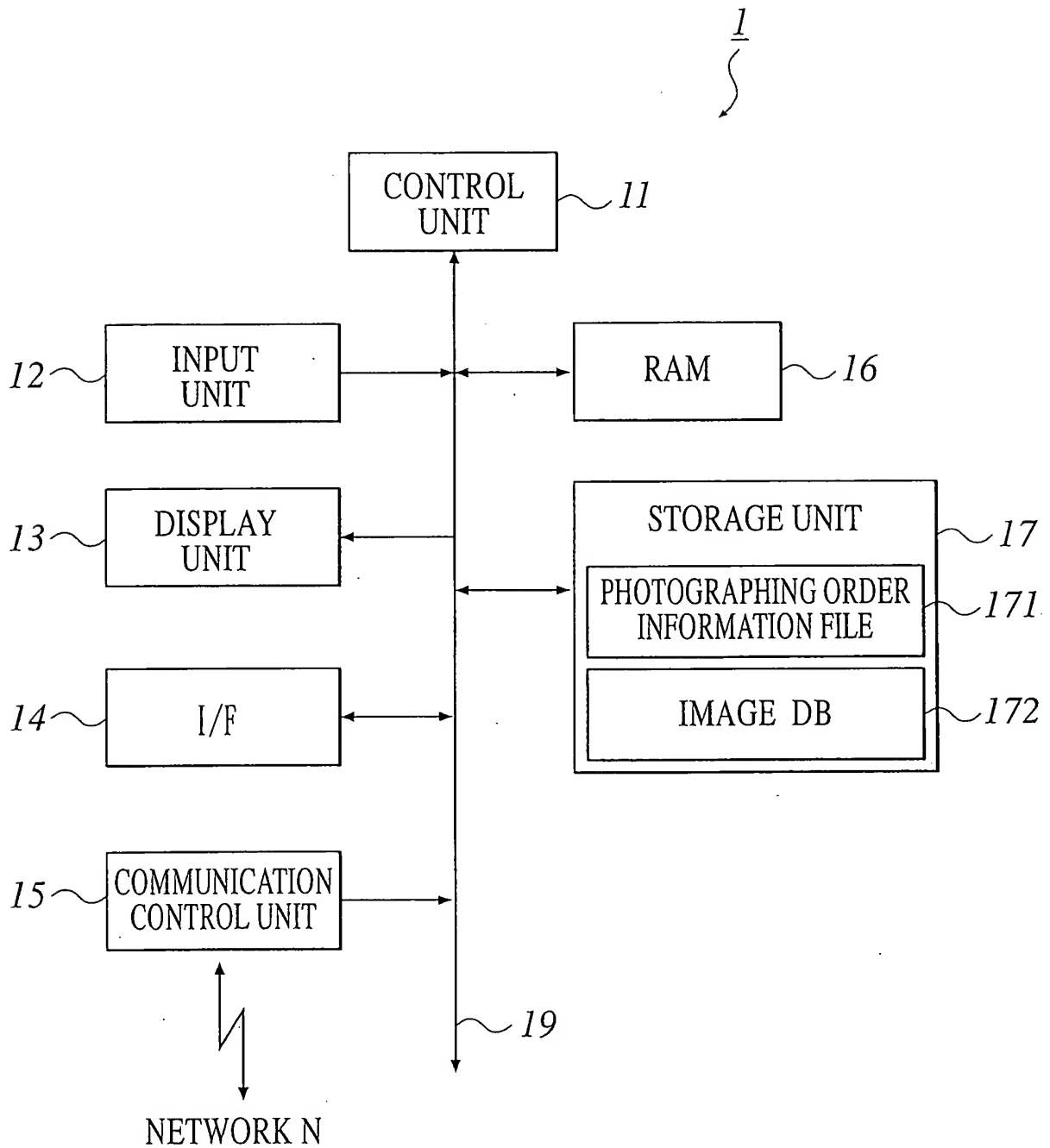
2 / 18
FIG.2



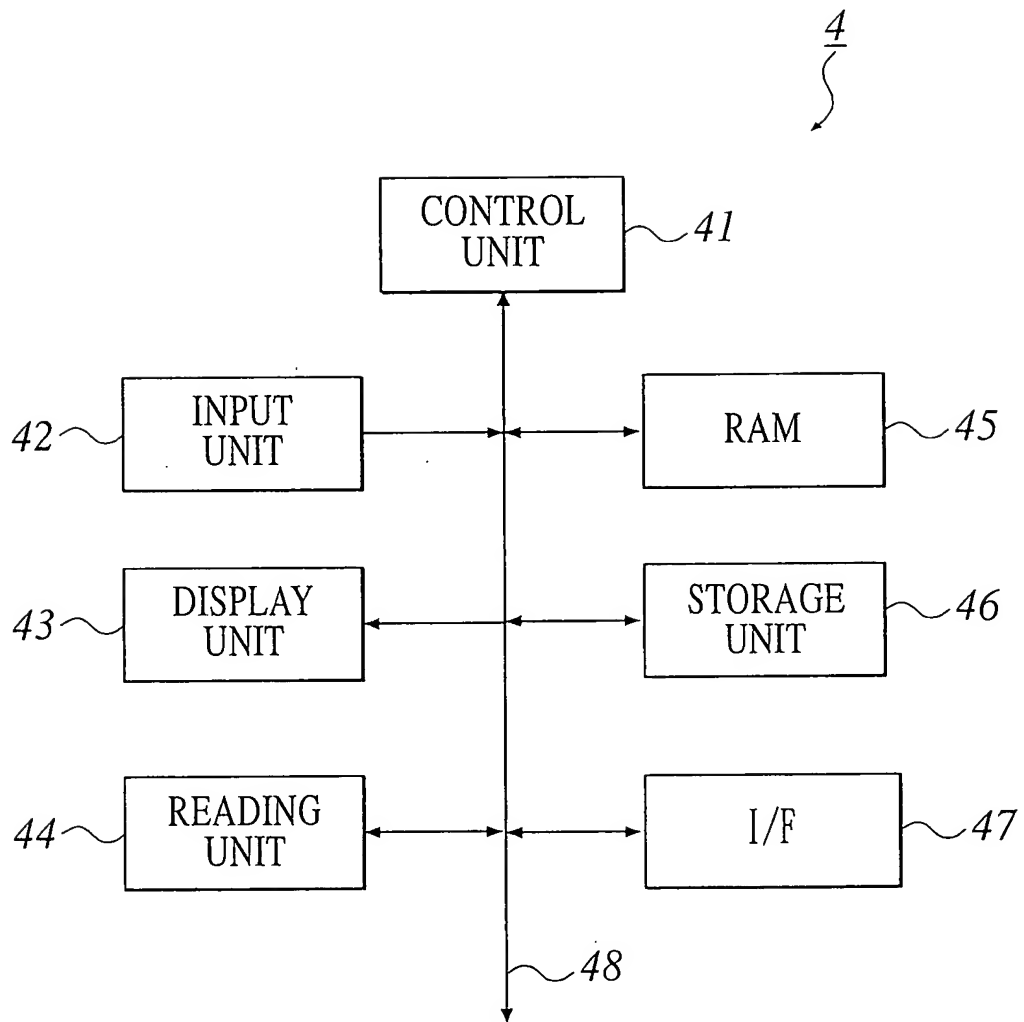
3 / 18
FIG.3



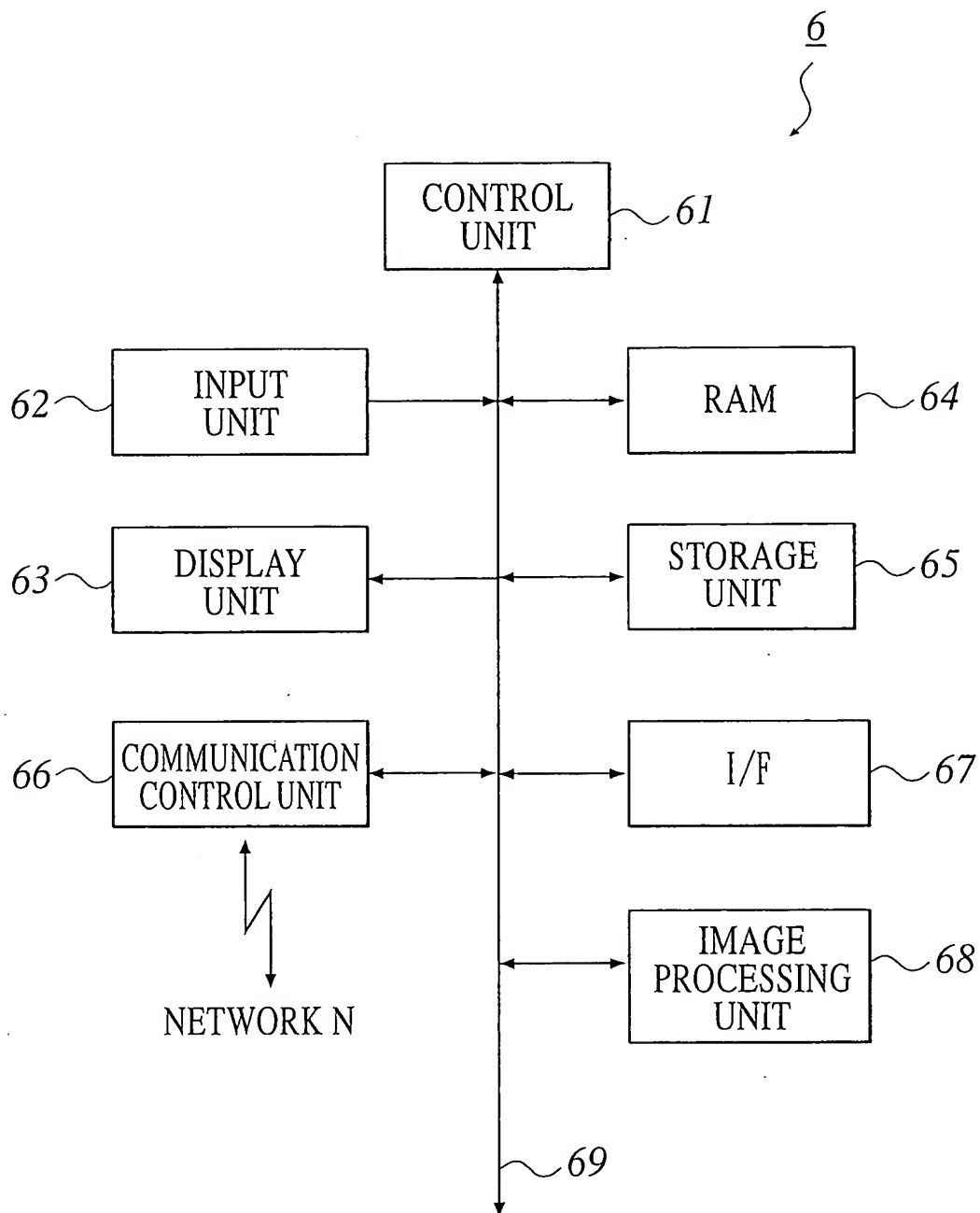
4 / 18
FIG.4



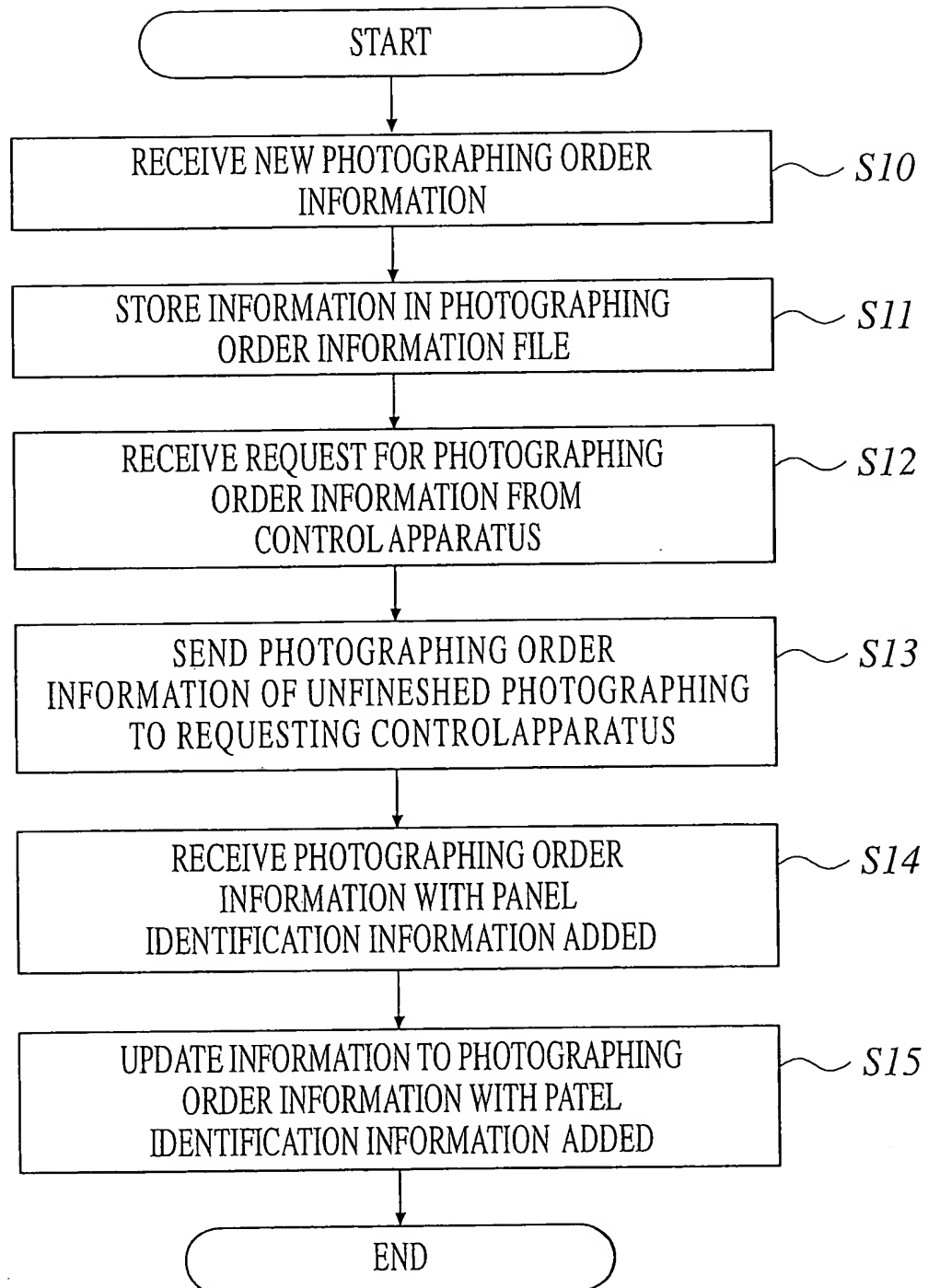
5 / 18
FIG.5



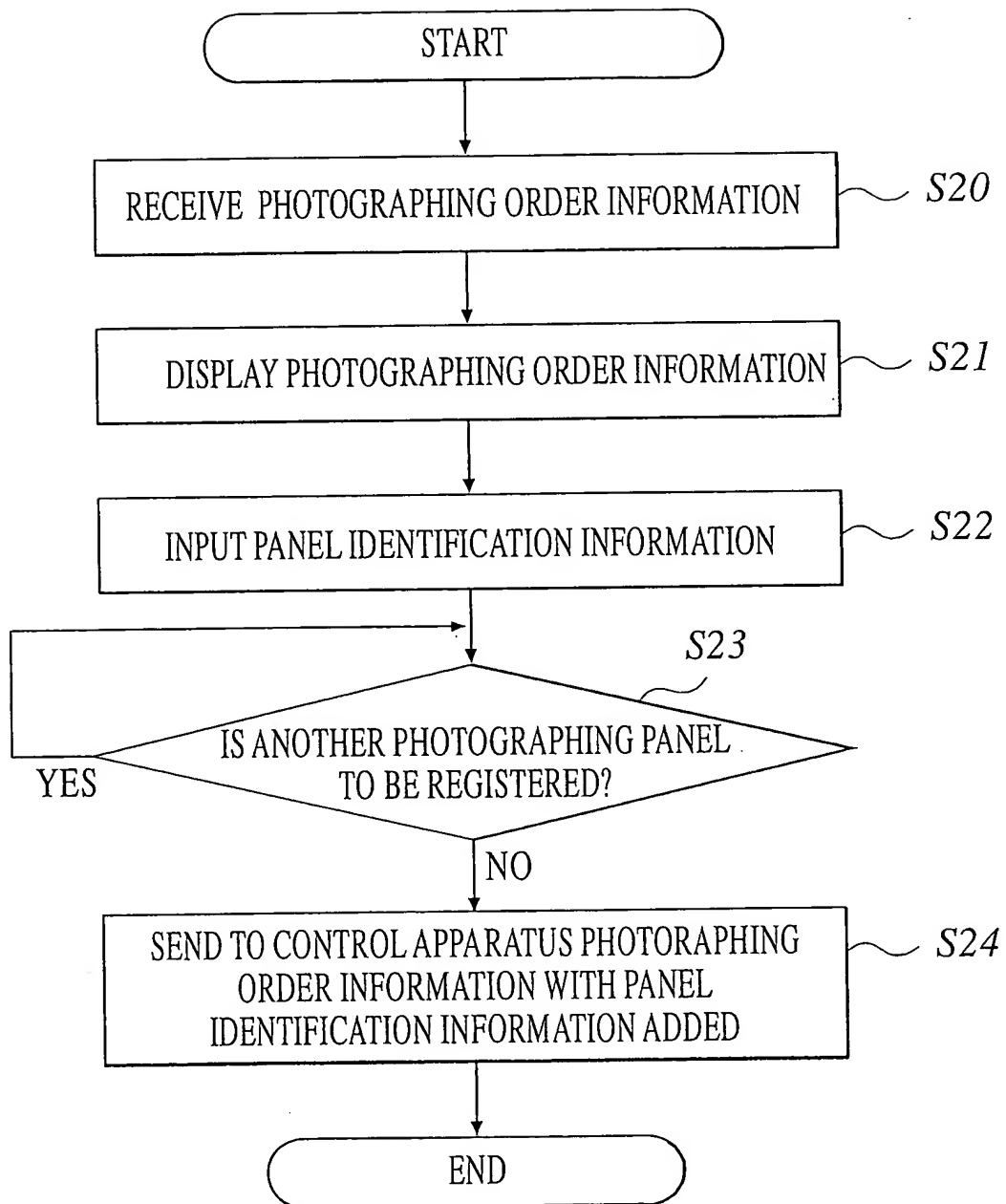
6 / 18
FIG. 6



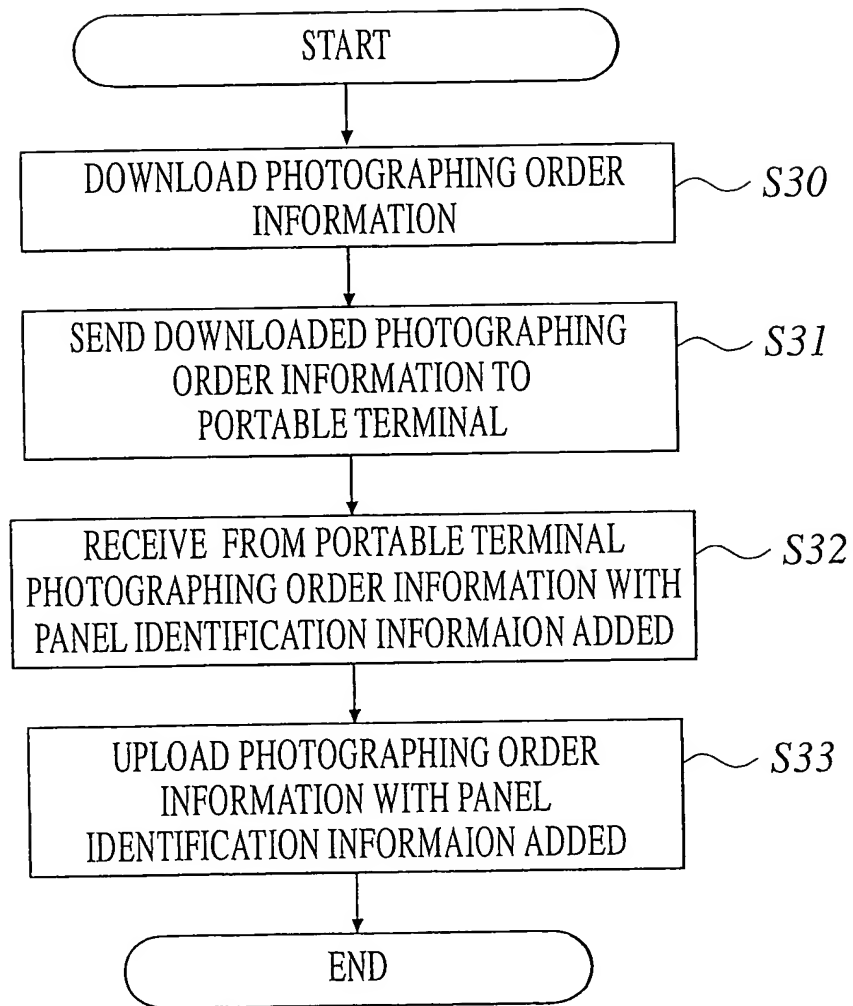
7 / 18
FIG. 7



8 / 18
FIG. 8



9 / 18
FIG. 9



10 / 18
FIG. 10

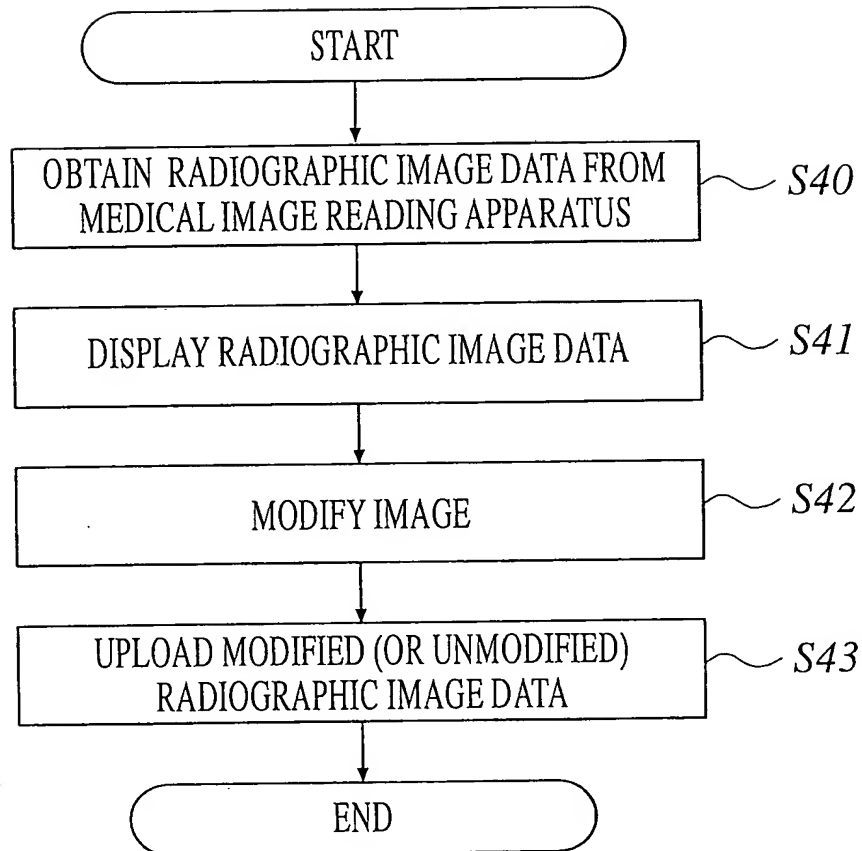







FIG.11

A1		A2				
PATIENT ID	NAME	HOSPITAL ROOM	AGE	SEX	REQUESTING DEPARTMENT	RADIO GRAPHIC PART
0001	ICHIRO YAMADA	A101	40	MALE	INTERNAL MEDICINE	CHEST ETC OBLIQUE
12345	TARO SAKURA	A101	10	MALE	INTERNAL MEDICINE	INFANT CHEST-P-A
⋮	⋮	⋮	⋮	⋮	⋮	⋮
⋮	⋮	⋮	⋮	⋮	⋮	⋮

13 / 18
FIG.13

A9 {

 0/2	 ALL	
 3 PATIENT ID	 4 AGE	 5 SEX
A-101	40	MALE
A-101	10	MALE

14/ 18
FIG.14A

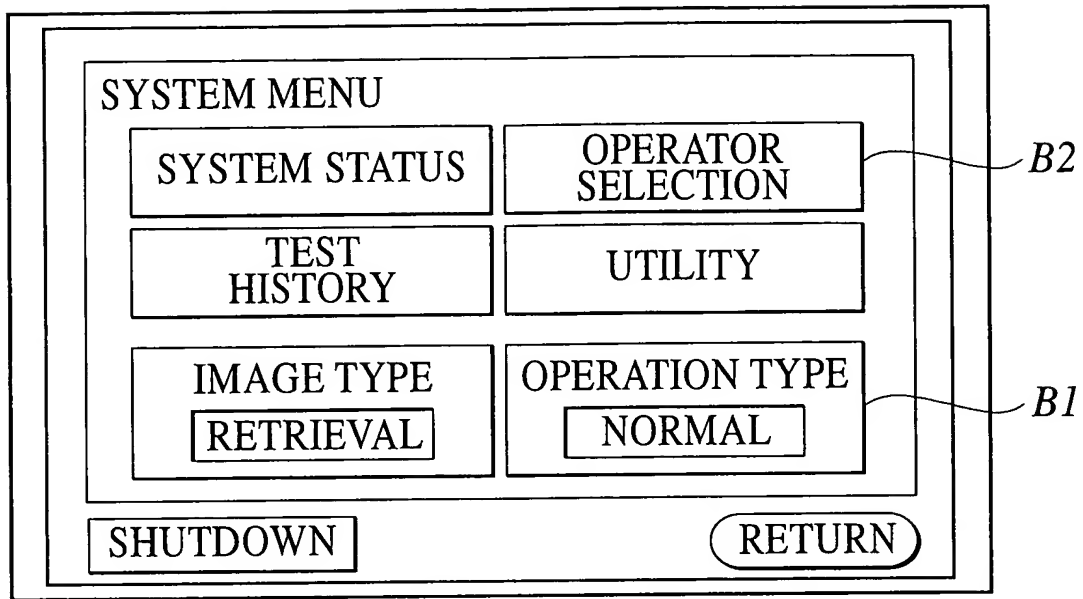


FIG.14B

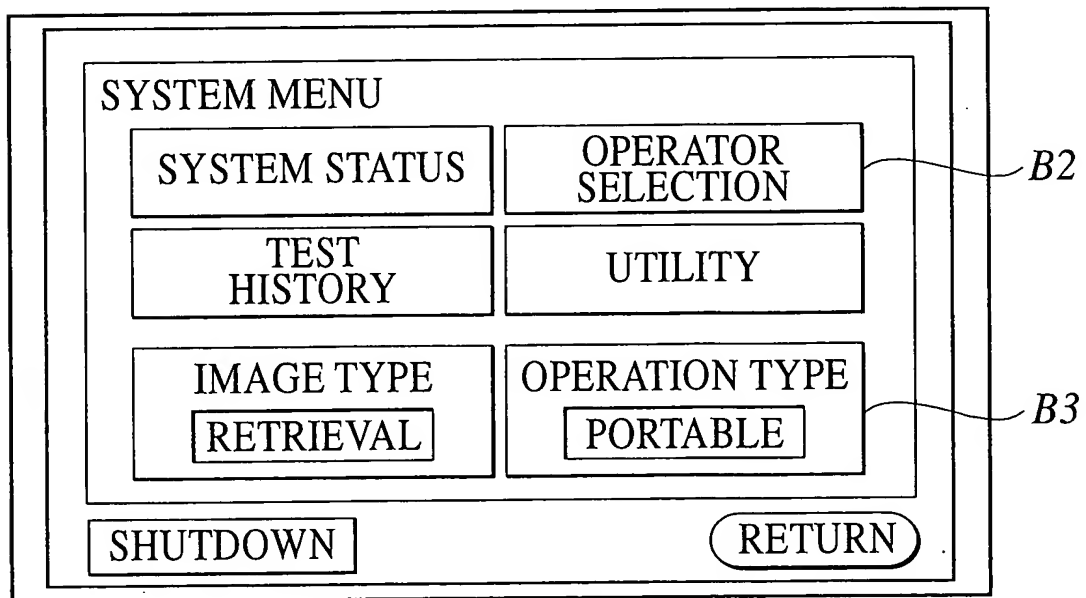


FIG.15

B6 OPERATOR: **B5**

PATIENT ID	12345	SEX	MALE	1/4
NAME ROMAN LETTER	sakura tarou	BIRTH DATE (AGE)	1993-04-23 O'CLOCK MINUTE SECOND (10 YEARS 10 MONTHS OLD)	△ △
NAME KANA	サクラ タロウ	BIRTH DATE (TIME UNSHOWN)	1993-04-23 (10 YEARS 10 MONTHS OLD)	▽ ▽
NAME KANJI	桜 太郎	PATIENT		RETRIEVAL

B4

ABC/abc	keyboard	a	b	c	d	e	f	g	_
h	i	j	k	l	m	n	@	DEL	BS
o	p	q	r	s	t	u	"	←	→
v	w	x	y	z		#	,		ENTER
Caps Lock	[Space]					&	;		

B7

ALLCLEAR	CANCEL	OK
----------	--------	----

B11

FAVORITE		Q 350		⇐ 550		B 170	
HEAD	CERVIX	CHEST	ABDOMEN	SPINE	THORAX		
UPPER LIMB	LOWER LIMB	NEONATE	MAMMOGRAM	SPECIAL IMAGING	TEST		
CHEST RIGHT LUNG	A→P	P→A	SIDE				
CHEST LEFT LUNG	A→P	SIDE					
CHEST ETC	OBLIQUE	APICAL	EXHALATION	PNEUMOTHORAX			
INFANT CHEST	P→A	A→P	SIDE	OBLIQUE			
INFANT THORACIC ABDOMINAL	P→A	A→P	SIDE				
FOLLOWUP	P→A	INFANT PA					

RESERVATION

<< 1/5 >>

CANCEL

OK

B12

FIG.17B

B14

TAB TYPE	2
	→
	→

FIG.17C

B14

TAB TYPE	2
	←
	←

FIG.17A

OPERATOR: TARO SUZUKI

CONDITION

RESERVATION 2 CASE SUSPEND 0 CASE

PATIENT ID	TAB TYPE	NAME	SEX	BIRTH DATE	IMAGING REGION	IMAGING NUMBER	SUSPEND
0001	2	ICHIRO YAMADA	MALE	/ /	CHEST ETC OBLIQUE	0/2	SUSPEND
12345	3	TARO SAKURA	MALE	/ /	INFANT CHEST-AP	0/2	SUSPEND

B13

B14

SELECT ALL

TRANSMIT

RECEIVE

CONFIRMATION SCREEN

UPDATE LIST

SPOT CONDITION

SET CONDITION

DELETE

MODIFY

NEW/ RETRIEVAL

FIG. 18

OPERATOR : TARO SUZUKI					
B15		B16		B17	
<div> <div>PATIENT ID 0001</div> <div>NAME ICHIRO YAMADA</div> </div>	<div> <div>PATIENT ID 0001</div> <div>NAME ICHIRO YAMADA</div> </div>	<div> <div>PATIENT ID 12345</div> <div>NAME TARO SAKURA</div> </div>	<div> <div>PATIENT ID 12345</div> <div>NAME TARO SAKURA</div> </div>	<div> <div>MODIFY CONDITION</div> <div>MODIFY PATIENT</div> </div>	
<div>170</div> <div>RESOLUTION: NORMAL</div> <div>ORDER=5 SERIES=1 IMAGE=1</div>	<div>170</div> <div>RESOLUTION: NORMAL</div> <div>ORDER=6 SERIES=1 IMAGE=2</div>	<div>170</div> <div>RESOLUTION: NORMAL</div> <div>ORDER=7 SERIES=1 IMAGE=1</div>	<div>170</div> <div>RESOLUTION: NORMAL</div> <div>ORDER=8 SERIES=1 IMAGE=2</div>	<div> <input type="checkbox"/> CHEST ETC OBLIQUE <input type="checkbox"/> CHEST ETC APICAL <input type="checkbox"/> INFANT CHEST-P-A </div>	<div> <div>NG</div> <div>OK</div> </div>
<div> <input type="checkbox"/> CHEST ETC OBLIQUE <input type="checkbox"/> CHEST ETC APICAL <input type="checkbox"/> INFANT CHEST-P-A </div>	<div> <input type="checkbox"/> CHEST ETC OBLIQUE <input type="checkbox"/> CHEST ETC APICAL <input type="checkbox"/> INFANT CHEST-P-A </div>	<div> <input type="checkbox"/> CHEST ETC OBLIQUE <input type="checkbox"/> CHEST ETC APICAL <input type="checkbox"/> INFANT CHEST-P-A </div>	<div> <input type="checkbox"/> CHEST ETC OBLIQUE <input type="checkbox"/> CHEST ETC APICAL <input type="checkbox"/> INFANT CHEST-P-A </div>	<div> <div>NG</div> <div>OK</div> </div>	<div> <div>NG</div> <div>OK</div> </div>
<div> <input type="checkbox"/> CHEST ETC OBLIQUE <input type="checkbox"/> CHEST ETC APICAL <input type="checkbox"/> INFANT CHEST-P-A </div>	<div> <input type="checkbox"/> CHEST ETC OBLIQUE <input type="checkbox"/> CHEST ETC APICAL <input type="checkbox"/> INFANT CHEST-P-A </div>	<div> <input type="checkbox"/> CHEST ETC OBLIQUE <input type="checkbox"/> CHEST ETC APICAL <input type="checkbox"/> INFANT CHEST-P-A </div>	<div> <input type="checkbox"/> CHEST ETC OBLIQUE <input type="checkbox"/> CHEST ETC APICAL <input type="checkbox"/> INFANT CHEST-P-A </div>	<div> <div>NG</div> <div>OK</div> </div>	<div> <div>NG</div> <div>OK</div> </div>
<div> <div><<</div> <div><</div> <div>></div> <div>>></div> </div>				<div>SUSPEND</div>	<div>COMPLETE</div>